

SUBJECT: **LOS ANGELES COUNTY PARAMEDIC SCOPE OF PRACTICE**

<i>IN ADDITION TO THE FOLLOWING, THE PARAMEDIC SCOPE OF PRACTICE INCLUDES REFERENCE NO. 802, LOS ANGELES COUNTY EMT SCOPE OF PRACTICE</i>	
A. PATIENT ASSESSMENT	E. MEDICATION ADMINISTRATION
<ol style="list-style-type: none"> 1. Use capnometry and measuring devices to measure capnography waveforms 2. Utilize electrocardiographic devices and monitor electrocardiograms (ECG), including 12-lead ECGs 3. Obtain venous or capillary blood samples 4. Use electronic devices to measure glucose 	<ol style="list-style-type: none"> 1. Administer approved medications by the following routes: <ol style="list-style-type: none"> a. oral b. intranasal c. sublingual d. transcutaneous e. topical f. inhalation g. rectal h. intravenous i. intraosseous j. intramuscular k. subcutaneous 2. Administer the following medications (using pre-packaged unit dose products when available): <ol style="list-style-type: none"> a. 10%, 25%, and 50% dextrose b. adenosine c. aerosolized/nebulized albuterol by hand held nebulizer or hand held mask d. amiodarone e. aspirin f. atropine sulfate g. calcium chloride h. diazepam (<i>disaster caches only</i>) i. diphenhydramine hydrochloride j. dopamine hydrochloride k. epinephrine l. fentanyl m. glucagon n. midazolam o. morphine sulfate p. naloxone hydrochloride q. nitroglycerin tablet or spray r. ondansetron s. pralidoxime chloride (2-PAMCl) t. sodium bicarbonate
B. AIRWAY MANAGEMENT AND OXYGEN ADMINISTRATION	
<ol style="list-style-type: none"> 1. Use a laryngoscope to visualize the airway and remove a foreign body with Magill forceps 2. Insert and perform pulmonary ventilation by use of: <ol style="list-style-type: none"> a. perilaryngeal airway (King LTS-D) in adult and pediatric patients over the age of twelve (12) and at least four (4) feet tall b. oral endotracheal intubation in adults and pediatric patients over the age of twelve (12) or height greater than the length of the pediatric resuscitation tape c. stomal intubation 3. Utilize mechanical ventilation devices for continuous positive airway pressure (CPAP). 	
C. RESCUE AND EMERGENCY CARE	
<ol style="list-style-type: none"> 1. Perform needle thoracostomy at the 2nd intercostal space, mid-clavicular line 2. Perform defibrillation 3. Perform synchronized cardioversion 4. Perform transcutaneous pacing for symptomatic bradycardia 5. Utilize hemostatic dressings 6. Utilize Valsalva maneuver 7. Monitor thoracostomy tubes 	
D. INTRAVENOUS AND INTRAOSSEOUS ACCESS	
<ol style="list-style-type: none"> 1. Insert intravenous (IV) catheters, saline locks, or needles in peripheral veins 2. Monitor and administer medications and IV fluids through external venous pre-existing vascular access devices (PVADs) in the following: <ol style="list-style-type: none"> a. cardiac arrest b. extremis due to circulatory shock c. base station order 3. Monitor and administer normal saline solution 4. Monitor and adjust IV solutions of potassium, maximum 40mEq/L 5. Monitor total parenteral nutrition (TPN) 6. Perform adult and pediatric intraosseous insertion during cardiac arrest. 7. Obtain venous or capillary blood samples 	
	F. Trial Studies
	Procedures or medications may be implemented on a trial basis when approved by the Medical Director of the EMS Agency.
	AUTHORITY
	California Health and Safety Code, Division 2.5, Section 1797.172 California Code of Regulations, Title 22, Section 100146 Reference 802, Los Angeles County EMT Scope of Practice